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MEDICAL OFFICER OF HEALTHS REPORT, 1949

To the Chairman, and Members of the Usk Urban District Council

I beg herewith to present the Annual Report of the Medical Officer of Health Usk Urban District Council

The implementation of Part III of the National Health Service Act, 1946, (Health Services provided by Local Health Authorities) has been revolutionary. The creation of twolargeHealth Authorities i.e. County Council's and County BoroughCouncils, did not effect, substantially, The Urban District but, in many respects has given to the Council more scope to better its Public Health Services.

Under the de-centralisation of Health Services agreed upon by the County Council and the District Councils and the Ministry, a full time Medical Officer of Health was appointed to Usk Urban District from Ist January, 1949. The duties of the Medical Officer of Health include, by agreement, supervision of the Public Health Departments of the other three Local Authorities (i.e, Abergavenny R.D.C. Abergavenny Boroughand Pontypool R.D.C) which, together, form No 10 Health Area within the Administrative County of Monmouth.

The work of the Medical Officer of Health is very varied, and as the County Council had to retain seven eleventh's of the Medical officer's time for Child Welfare Clinics and School Medical Inspections, four eleventh's of the time is allocated to sanitary work to be spread over four Councils

It is realised that the allocation of the time for the various functions of the Medical Officer of Health is not completely satisfactory, as more time should be given for Public Health work, but it must be remembered thatthe National Health Service is the most progressive Service ever enforced in any country and, therefore, liable to re-adjustment in the future. Moreover, the great shortage of doctors prepared to join the Public Health Services is a handicap, and Ipersonally feel that if salaries are not adequately increased in the near future, shortage of doctores may imperil the working of the whole system.

SOCIAL CONDITIONS OF THE URBAN AREA

Being the centre of an agricultural district the activities of the town are mainly concerned with agriculture and allied trades. Those inhabitants who do not gain their livelihood in agriculture and allied pursuits, are employed in neighbouring large towns or at the Royal Ordnance Factory approximately two miles distant from the town, and the new Nylon Factory which is some six miles distant. The Registrar-General's estimate of the population in 1949 was 1717.

Rateable Value:- £8233.
Product odf a Penny Rate:- £31-9-0
Number of dwelling houses and residences :- 455.
Area:- The area of the district is 655 acres.

MATERNITY AND CHILD WELFARE

Babies can be seen once a week at Ty-Brith Centre Usk; expectant mothers can be seen fortnightly at the same centre [illegible] Health Visitor is in attendance, and all Welfare Foods can be obtained at the Centre.

The monthly average number of babies seen at the Child Welfare Clinic was 153. This figure includes cases from the Pontypool R.D.C. Area

DOMICILIARY MIDWIFERY SERVICE

Under the re-allocation of the District Midwifery Service, one district Midwife is resident in the Urban District. The monthly average of nursing visits was 54, this figure includes visits made in the Pontypool Rural District Area.

DISTRICT NURSING SERVICE.

There is one District Nurse resident in the Urban District The Monthly average number of nursing visits was 102.

HEALTH VISITING

One Health Visitor is doing the routine domiciliary visits, School Inspections (cleanliness of body and clothes) and attends the Maternity and Child Welfare Centre.

NIGHT NURSING SERVICE

The County Council had voted a small sum for the provision of a Night Nursing Service. The Night Nurses, male and female [illegible] be in possession of certain minimum qualifications.

DOMESTIC HELP SERVICE

The County Council has provided a Domestic Help Service which is intended for those cases where there is illness, and where there is no able-bodied relative who could give the necessary assistance in the household. The service has been useful in providing assistance to aged persons and cases of chronic sick, who otherwise would have had to be admitted to Hospitals, thereby helping to relieve the pressure upon hospital accommodation.

The Service is under the direction of the Area Committee Clerk (Mr D.A.Lewis). Applicants for the Service are assessed to repay the cost of the Service in relation to their income; persons with a gross income of less than £3-0-0 per week receive the Service free of charge

The hours allocated to each case are recommended after personal investigation by the Di strict Nurse, Midwife, or Health Visitor; and are submitted to me for approval. Cases where the recommendation exceeds 30 hours per week have to be submitted by the Area Committee Clerk to the County Health Committee for investigation. Except maternity cases.

There are approximately 30 Domestic Helps in the No IO area, all are engaged on a Temporary Part-time basis. Thenumber of cases attended was 80; the average monthly number of hours worked was 2220.

AMBULANCE SERVICE.

The County Council took over the responsibility of the Ambulance Service in I948. The Urban District was served by one St John ambulances stationed at Usk, and Ambulances, Available from Pontypool depot under the central control of the County Ambulance Officer at Caerleon.

VACCINATION AGAINST SMALLPOX AND IMMUNISATION AGAINST DIPHTHERIA.

Under the National Health Service Act, I946, vaccination against smallpox and immunis tion against diphtheria has been carried out at the surgeries of the General Practitioners , and at the Maternity and Child Welfare Centres; in both cases free of charge.

The figures for vaccination against smallpox and immunisation against diphtheria for the Borbugh are as follows;-

Vaccination against Smallpox, I949.

Age groups:-

Under I yr.	I to 4 yrs.	5 to I4 yrs.	Over I5 yrs.	Total.
IO	7	-	I4	3I

IMMUNISATION AGAINST DIPHTHERIA.

Age Groups:-	under 5 yrs.	5 to I4 yrs.	Tatal.
	29	2	3I

Since the compulsory vaccination against smallpox has been abolished, the Urban District, like the rest of the country, followed the trend of a decrease in vaccination; from the public health point of view it is very regrettable. As shown in two outbreaks of imported smallpox, we are not free of the possibility of a more serious outbreak. great encouragement is given to mothers for both vaccination against smallpox and immunisation against diphtheria, but the results are more encouraging for immunisation than for vaccination.

HEALTH EDUCATION

The early part of the last century saw the birth of Public Health as we know it now. The main object being the provision of wholesome water supply, sanitation, and notification of infectious dis[illegible] At the beginning of this century the influence of the environment became more apparent and more emphasis was given to this new factor. We relise now that we cannot complete the picture of ideal health without education. Under the auspices of the Central Council for Health Education, Local Authorities have undertaken a compaign to improve the knowledge of the Community on health matters, and a County Health Education Officer was appointed in I948. We must inprove our body cleanliness and home cleanliness, including an improvement in our handling of Food. Some forms of health education have been undertaken including display of posters and distribution of leaflets, and i feel this is one of our major tasks in public health to educate the people on all aspects of life.

MENTAL HEALTH SERVICE.

A County Psychiatrist was appointed in I948 for the purpose of a Mental Health Service. This Service is co-ordinated with the regional Hospital Board, and Hospital Management Committees.

No Adult Guidance Clinics are held in Usk Urban District but individuel cases, patients suffering from early nervous strain, and who are finding difficulty in adjusting themselves either in their home or at their work, are seen by Dr J. Newcombe the County

Psychistrist. Cases considered too far advanced are referred to the Regional Hospital Board Psychiatrist.

WELFARE SERVICES.

The Welfare Officer of No IO Area caters for the needs of Abergavenny Borough as regards Welfare Services, which come within the provisions of the National Assistance Act, I948.

Medical APPLIANCES.

The location of the Medical Appliances Depot for the Usk Urban District is c/o Nurse Spencer Inglenook Abergavenny Road Usk.

LOCATION OF MEDICAL OFFICER OF HEALTH AND AREA HEALTH OFFICE

The County Council has now taken over Leven House Abergavenny, and the Services for which I am responsible will be operated from there.

VITAL STATISTICS AND INFECTIOUS DISEASES TABLES. (attached)

VITAL STATISTICS	Total	Males	Females
Total deaths (per Registrar)	IO	6	4
Corrected deaths	2I	I3	8

Death Rate per IOOO of estimated population	I2.2
Death Rate in County of Monmouth for I949	I2.I
Death Rate for England and Wales	II.7

Causes of Death

	Males	Females
Cancer of all other sites	2	I
Cancer of Breast		I
Intracranial Vascular Lesions	I	3
Heart Diseases	4	I
Bronchitis	3	
Other Respiratory Diseases	I	
Nephritis	I	
All other causes		2
Other Violent cases	I	
Totals	I3	8

Total Births (per Registrar)	I	I
Corrected after transfer	I5	I4
Legitimate	I5	I2
Illegitmate		2

Total Births (corrected after transfer)	29
Birth Rate per Iooo.....	I6.8
Birth Rate for County of Monmouth	I8.2
Deaths of Infants under I year.....	Nil
Infantile Mortality Rate.....	Nil
County Rate.....	42.7

Infectious Diseases.

Twenty-four cases of infectious disease were notified during the year and of these it was found necessary to remove one case of Scarlet Fever to hospital.

ANALYSIS OF CASES OF INFECTIOUS DISEASES

Scarlet Fever	2
Erysipelas½.....	I
Measles and German Measles.....	I4
Whooping Cough.....	7
Total	24

The necessary steps of isolation and disinfection were taken where necessary .

TUBERCULOSIS.

The number of cases of Tuberculosis on the Register at the 3Ist December I949 was:-

Males		Females	
Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary
6	4	5	2

Total number of cases on Register at 3Ist December, I949-I7

Discussion of Tables

There were only two cases of Scarlet Fever, and the rate per I000 population is well below that of England and Wales.

One case of Ondolent Fever was notified, and the source was traced. Three cows were found infected and slaughtered under the supervision of the Sanitary Inspector.

The cases of Tuberculosis on the register are below the figure for I948 (I7 against 20), neverless there is room for further improvement, and once more I draw the attention of the Health Committee to the importance of finding suitable accomodation as soon as cases are discharged from Sanitoria. As I have often said at the Health Committee, Tuberculosis is an infectious disease of the household and we must bear in mind it will spread to the family if proper measures are not taken, and the most important of these measures is the sleeping accommodation. A case of tuberculosis must have one room of its own, and it is only by taking these measures that we can hope to spamp out this glaring evil

In conclusion, I may say the health of the Urban District is satisfactory

I have the honour to be
Your obedient Servant
F.C.R. Harvey
Medical Officer of Health